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021005

7590

12/07/2004

HAMILTON, BROOK, SMITH & REYNOLDS, P.C. I P E
530 VIRGINIA ROAD
P.O. BOX 9133
CONCORD, MA 01742-9133

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01/04/2005 MBERHE1 00000094 10608780

01 FC:2501 700.00 OP
02 FC:1504 300.00 OP
03 FC:8000 45.00 OP

INVENTION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/608,780	06/27/2003	Jagdish Narayan	0717.2033-002	8117

TITLE OF INVENTION: DOMAIN EPITAXY FOR THIN FILM GROWTH

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO YES	\$375 700	\$300	\$675 1000	03/07/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS			
NHU, DAVID	2818	438-681000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Hamilton, Brook,

1. Smith & Reynolds, P.C.

2. _____

3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Kopin Corporation

Taunton, MA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

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- ☒ Issue Fee
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- ☒ The Director is hereby authorized to charge any deficiency Deposit Account Number 08-0380 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above) A copy of previously filed Small-Entity Statement is enclosed.

☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date

Typed or printed name N. Scott Pierce

Registration No. 34,900

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